**Evaluation Form**

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| STATION 3 – fielding/throwing |



|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | | |
|  | | |  |
| League Age: | | |  |
|  | | |  |
| League: | |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| RATING  (circle one) | | | | |
|  |  |  |  |  | |
| 1 | 2 | 3 | 4 | 5 | |
| Needs Improvement | Below Average | Average | Above Average | Outstanding | |
|  |  |  |  |  | |

|  |  |
| --- | --- |
| NOTES: |  |
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